

**UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF ILLINOIS**

In the Matter of
THE CHICAGO PARK DISTRICT

v.
THE CHICAGO BEARS FOOTBALL CLUB, INC.
and THE BEARS STADIUM LLC

(2)

06CV3957
JUDGE MANNING
MAGISTRATE JUDGE SCHENKIER

APPEARANCES ARE HEREBY FILED BY THE UNDERSIGNED.

Plaintiff, The Chicago Park District

(A)		(B)	
<p>SIGNATURE <i>Richard W. Burke</i></p> <p>NAME Richard W. Burke</p> <p>FIRM Burke, Warren, MacKay & Serritella, P.C.</p> <p>STREET ADDRESS 330 N. Wabash, 22nd Floor</p> <p>CITY/STATE/ZIP Chicago, Illinois 60611-3607</p> <p>TELEPHONE NUMBER 312-840-7000</p> <p>FAX NUMBER 312-840-7900</p> <p>E-MAIL ADDRESS rburke@burkelaw.com</p> <p>IDENTIFICATION NUMBER (SEE ITEM 4 ON REVERSE) 0344656</p>		<p>SIGNATURE <i>George J. Lynch</i></p> <p>NAME George J. Lynch</p> <p>FIRM Burke, Warren, MacKay & Serritella, P.C.</p> <p>STREET ADDRESS 330 N. Wabash Ave., 22nd Floor</p> <p>CITY/STATE/ZIP Chicago, Illinois 60611-3607</p> <p>TELEPHONE NUMBER 312-840-7000</p> <p>FAX NUMBER 312-840-7900</p> <p>E-MAIL ADDRESS glynch@burkelaw.com</p> <p>IDENTIFICATION NUMBER (SEE ITEM 4 ON REVERSE) 1713264</p>	
<p>MEMBER OF TRIAL BAR? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>TRIAL ATTORNEY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>		<p>MEMBER OF TRIAL BAR? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>TRIAL ATTORNEY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>	
		<p>DESIGNATED AS LOCAL COUNSEL? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>	
<p>(C)</p> <p>SIGNATURE <i>Aaron H. Stanton</i></p> <p>NAME Aaron H. Stanton</p> <p>FIRM Burke, Warren, MacKay & Serritella, P.C.</p> <p>STREET ADDRESS 330 N. Wabash, 22nd Floor</p> <p>CITY/STATE/ZIP Chicago, IL 60611-3607</p> <p>TELEPHONE NUMBER 312-840-7000</p> <p>FAX NUMBER 312-840-7900</p> <p>E-MAIL ADDRESS astanton@burkelaw.com</p> <p>IDENTIFICATION NUMBER (SEE ITEM 4 ON REVERSE) 6244251</p>		<p>SIGNATURE FILED</p> <p>NAME MICHAEL W. DOBRINS</p> <p>FIRM CLERK, U.S. DISTRICT COURT</p> <p>STREET ADDRESS</p> <p>CITY/STATE/ZIP</p> <p>TELEPHONE NUMBER</p> <p>FAX NUMBER</p> <p>E-MAIL ADDRESS</p> <p>IDENTIFICATION NUMBER (SEE ITEM 4 ON REVERSE)</p>	
<p>MEMBER OF TRIAL BAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> <p>TRIAL ATTORNEY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/></p>		<p>MEMBER OF TRIAL BAR? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>TRIAL ATTORNEY? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/></p>	
<p>DESIGNATED AS LOCAL COUNSEL? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>		<p>DESIGNATED AS LOCAL COUNSEL? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/></p>	